

*Paperwork Reduction Act Submission

Please read the instruction before completing this form. For additional forms or assistance in completing this forms, contact your agency's Paperwork Reduction Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 Seventeenth St. NW, Washington, DC 20503.

1. Agency/Subagency Originating Request: U.S. Department of Housing and Urban Development Public and Indian Housing		2. OMB Control Number: a. b. x 2577-	
3. Type of information collection: (check one) a. <input checked="" type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change , of previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change , of previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note item A2 of Supporting Statement instructions.		4. Type of review requested: (check one) a. Regular b. <input checked="" type="checkbox"/> Emergency - Approval requested by 10/09/2007 c. <input type="checkbox"/> Delegated 5. Small entities: Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 6. Requested expiration date: a. Three years from approval date b. <input checked="" type="checkbox"/> Other (specify)	
7. Title: Disaster Housing Assistance Program (DHAP)			
8. Agency form number(s): (if applicable)			
9. Keywords: Housing, Disaster Housing Assistance Program (DHAP); Hurricane Katrina; Hurricane Rita; Public Housing			
10. Abstract: The paperwork involved in this action involves all activities related to DHAP from execution of the a grant agreement to case management .HUD will invite public housing agencies that currently administer the Housing Choice Voucher program to administer DHAP based on several factors such as where the DHAP eligible families are currently residing or have indicated they wish to receive DHAP assistance.			
11. Affected public: (mark primary with "P" and all others that apply with "X") a. Individuals or households e. Farms b. Business or other for-profit f. Federal Government c. Not-for-profit institutions g. P State, Local or Tribal Government		12. Obligation to respond: (mark primary with "P" and all others that apply with "X") a. Voluntary b. <input checked="" type="checkbox"/> Required to obtain or retain benefits c. Mandatory	
13. Annual reporting and recordkeeping hour burden: a. Number of respondents 700 b. Total annual responses 469,700 Percentage of these responses collected electronically 75 c. Total annual hours requested 341,425 d. Current OMB inventory 0 e. Difference (+,-) 341,425 f. Explanation of difference: 1. Program change: 341,425 2. Adjustment:		14. Annual reporting and recordkeeping cost burden: (in thousands of dollars) Do not include costs based on the hours in item 13. a. Total annualized capital/startup costs 0 b. Total annual costs (O&M) 0 c. Total annualized cost requested 0 d. Current OMB inventory 0 e. Difference f. Explanation of difference: 1. Program change: 2. Adjustment:	
15. Purpose of Information collection: (mark primary with "P" and all others that apply with "X") a. Application for benefits e. <input checked="" type="checkbox"/> Program planning or management b. <input checked="" type="checkbox"/> Program evaluation f. Research c. General purpose statistics g. <input checked="" type="checkbox"/> Regulatory or compliance d. <input checked="" type="checkbox"/> Audit		16. Frequency of recordkeeping or reporting: (check all that apply) a. Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input checked="" type="checkbox"/> Reporting: 1. On occasion 2. <input checked="" type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input checked="" type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input checked="" type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe)	
17. Statistical methods: Does this information collection employ statistical methods? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Agency contact: (person who can best answer questions regarding the content of this submission) Name: Phyllis Smelkinson Phone: 202-402-4138	



19. Certification for Paperwork Reduction Act Submissions

On behalf of the U.S. Department of Housing and Urban Development, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9.

Note: The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320/8(b)(3). appear at the end of the instructions. The certification is to be made with reference to those regulatory provisions as set forth in the instructions.

The following is a summary of the topics, regarding the proposed collections of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It uses plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention periods for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
 - (i) Why the information is being collected;
 - (ii) Use of the information;
 - (iii) Burden estimate;
 - (iv) Nature of response (voluntary, required for a benefit, or mandatory);
 - (v) Nature and extent of confidentiality; and
 - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to collected (see note in item 19 of the instructions);
 - (i) It uses effective and efficient statistical survey methodology; and
 - (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of these provisions, identify the item below and explain the reason in item 18 of the Supporting Statement.

Signature of Program Official:

Date:

X
Milan M. Ozdinec, DAS for Public Housing and Voucher Programs

Supporting Statement for Paperwork Reduction Act Submissions

A. Justification

- 1. Reason for collection.** Families affected by Hurricanes Katrina and Rita who registered with the Federal Emergency Management Agency (FEMA) were able to receive assistance either through a direct or financial assistance program under Section 408 of the Robert T. Stafford Disaster Relief and Emergency Act (Stafford Act) (42 U.S.C. 5174). Those families that are still receiving assistance from FEMA will now be eligible for the Disaster Housing Assistance Program (DHAP), a joint initiative between HUD and FEMA under an Interagency Agreement. DHAP provides a monthly rent subsidy to assist these eligible families. PHAs that currently administer the Housing Choice Voucher program will be designated by HUD to administer DHAP in their jurisdiction. If the PHA is willing to do so, these PHAs will enter into Grant Agreements with FEMA to administer DHAP. Rental assistance payments under DHAP will commence on November 1, 2007. DHAP is a temporary housing assistance program that terminates on March 1, 2009.
- 2. Use of information.** The requested information requirements (how, by whom and for what purpose the information is to be used) for the voucher program consists of the following:

Information Collections Required of PHAs

Grant Agreement. Pursuant to FEMA's grant authority, grants will be provided to local PHAs to administer DHAP on behalf of FEMA for a period not to exceed 16 months commencing November 1, 2007 and ending by March 1, 2009. Purpose of collection is program compliance.

Disaster Information System (DIS). The PHA will access the DIS to verify the family's eligibility status which is determined by FEMA. The DIS is the reporting mechanism by which PHAs record family participation in DHAP and provide leasing information to HUD once the family is placed under a Disaster Rent Subsidy Contract and starts receiving DHAP assistance. All program funding, accounts and records are maintained in DIS. Purpose of collection is program compliance.

Certification of Family Responsibilities. The PHA must contact and inform all eligible families that, as a condition of participation in DHAP, the family must receive on-going case management services and sign a certification of family obligations. The Certification of Family Responsibilities is drafted by the PHA. HUD does not have a form for DHAP. Purpose of collection is program compliance.

Owner Contact. The PHA must contact the owner of the private rental unit where the family currently receives FEMA rental assistance (or the private rental unit identified as a suitable unit for families relocating out of a FEMA provided temporary housing unit) at the earliest opportunity, explain DHAP to the owner and determine if the owner is willing to participate in DHAP. The PHA will inform the owner of any changes in the portion of the rent to owner paid by the PHA and the family, including the incremental rent transition that will become effective March 1, 2008. Purpose of collection is program compliance.

DHAP Disaster Rent Subsidy Contract (DRSC). If the owner and the family agree to participate in DHAP the PHA will require the owner to execute a DRSC which will include the monthly rental portion paid by the PHA. Purpose of collection is program compliance.

Lease Addendum. If the owner and the family agree to participate in DHAP and lease in-place, the PHA will require the owner and family to sign the lease addendum as soon as possible. Purpose of collection is program compliance.

Housing Search Assistance. If a family wants to move from the FEMA-assisted unit, or the owner does not want to participate in DHAP or will not take steps to bring the unit into Housing Quality Standards (HQS) compliance, the PHA will inquire if the family wishes to move to another unit and receive DHAP assistance in the PHA's jurisdiction, or wishes to return to their pre-disaster jurisdiction or another jurisdiction and receive DHAP assistance where they plan to permanently reside. If the family wishes to remain in the PHA jurisdiction, the PHA provides the family with housing search assistance. If the family informs the PHA that they wish to initially lease under DHAP in an area outside the PHAs jurisdiction, the PHA is responsible for identifying the DHAP administering PHA with jurisdiction over the area. The PHA will advise the family how to contact and request assistance from that PHA, and promptly notify the PHA when to expect the family. Purpose of collection is program compliance.

Incremental Rent Transition. On March 1, 2008, families participating in DHAP will be required to pay a portion of the rent in preparation towards self-sufficiency when the DHAP ends on March 1, 2009. PHAs will implement the incremental rent transition by reducing the rental subsidy payment by \$50 for the March 2008 rent subsidy payment and each month thereafter. Purpose of collection is program compliance.

Rent Reasonableness. Generally, when a family initially requests to lease a unit under DHAP, the PHA does not determine if the rent for the unit is reasonable; however, if the owner subsequently wishes to increase the rent in either case while the unit is under the DRSC, the PHA must determine that the proposed new rent is reasonable. Purpose of collection is program compliance.

Housing Quality Standards (HQS). For those families that lease in place or move to FEMA-located housing, the PHA must conduct a limited inspection either on or in a reasonable time after the effective date of the DRSC to determine that there are no life-threatening deficiencies. All other units must meet an initial HQS before a DRSC is executed. Purpose of collection is program compliance.

Case Management. During the time the family is assisted under DHAP, each family will participate in case management services provided by the PHA. Case management services are required as part of the DHAP. PHAs will report case management outputs and resident outcomes through a HUD web-based tracking system. The system will track information such as the number of families being served and progress toward self-sufficiency goals. The web-based tracking system will be designed for use by case managers to input data as they work with families. This data will be compiled by the system to create a case management report for the PHA and HUD. PHAs are responsible for the provision of the case management services; reporting outputs and outcomes to HUD; and documenting that case management services are being provided to the family. Case management services must include a needs assessment and individual development plan (IDP) for each family. The assessment and IDP will guide the service provision to the family for the duration of the family's participation in DHAP. PHAs or their contractors are encouraged to assess if families are already receiving case management or other services and to coordinate efforts with these providers. The objective of the case management program is greater self-sufficiency for participating families. In cases where families may continue to need rental assistance when DHAP ends, the case management service provider must help the family identify other non-disaster supported housing solutions. Purpose of collection is program compliance.

3. **Use of automated collection techniques.** PHAs will report case management outputs and resident

outcomes through a HUD web-based tracking system. Participant data will also be accessed and input into DIS.

4. **Efforts to identify duplication.** There is no duplication of the subject information.
5. **Methods to minimize the burden on small entities.** No small entities are impacted.
6. **Consequences if collected less frequently.** The burden associated with DHAP is the minimum required to effectively implement and track case management. The information cannot be collected less frequently because the duration of the program is only 18 months.
7. **Special circumstances.** There are no special circumstances and the guidelines of 5 CFR 1320.6 are not violated.
8. This is being submitted as part of an emergency approval package. A *Federal Register* notice will be published on October 5, 2007. Comments will end on October 6, 2007.
9. **Payment to respondents.** No payments were offered.
10. **Assurance of confidentiality.** No assurance of confidentiality is provided, nor is it needed.
11. **Questions of a sensitive nature.** No sensitive questions are asked.

12. Estimated hour burden.

Description	Number of Respondents	Responses per Respondent	Total Annual Responses	Hours per Response	Total Hours
Grant Agreement	700	1	700	0.25	175
Disaster Information System	700	50	35,000	0.50	17,500
DHAP Certification of Family Responsibilities	700	50	35,000	0.25	8,750
Owner Contact	700	50	35,000	0.25	8,750
Disaster Rent Subsidy Contract	700	50	35,000	0.50	17,500
Lease Addendum	700	50	35,000	0.50	17,500
Housing Search Assistance	700	10	7,000	1	7,000
Incremental Rent Transition	700	50	35,000	1	35,000
Rent Reasonableness	700	10	7,000	0.25	1,750

Housing Quality Standards Inspections	700	50	35,000	0.50	17,500
Case Management	700	300	210,000	1	210,000
Totals	700		469,700		341,425

*700 PHAs + 35,000 families + 35,000 owners (700 PHAs was determined by a match of geographic locations of families determined eligible for DHAP assistance by FEMA to PHA jurisdictions)

**Each family will receive one hour per week of case management.

341,425 annual hours times average hourly costs of \$17 = **\$5,804,225**.

13. **Estimated annual cost.** There are no additional costs to respondents other than what is reported in Item 12.

14. **Federal Government Costs.**

Requirement	Annual Burden Hours	Cost per Hour	Total Cost
Financial Forms	500	\$33.00	\$16,500
Total			\$16,500

15. **Reason for program changes. This is a new collection.**

16. **Plans for publication of information collected.** Not applicable; information will not be published for statistical use.

17. **Approval to not display expiration date for OMB approval.** HUD is not seeking approval to not display the expiration date of the OMB approval.

18. **Exceptions to certification.** There are no exceptions to the certification statement identified in item 19.

B. Collection of Information Employing Statistical Methods:

Section B is not applicable since statistical methods are not used.